

#19 AmdtC
Sms 9-21-00

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of)

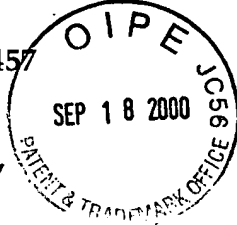
RAJEEV KRISHNAMURTHI, ET AL)

Serial No.: 08/863,457)

Filed: May 27, 1997)

) For: METHOD AND APPARATUS FOR
) PROVIDING AN ALERT WITH
) INFORMATION SIGNAL
) BETWEEN A MOBILE SWITCHING
) CENTER AND A BASE STATION

) Group Art Unit: 2732



AMENDMENT

Asst. Commissioner of Patents
Washington, D.C. 20231

Attention: Steven Nguyen, Examiner

Dear Sir:

In response to the Office Action dated June 26, 2000, please amend the above-identified application as follows:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231, on:

12 September, 2000

(Date of Deposit)

Kayla R. Seignious

(Registered Representative)

(Signature)

12 September, 2000

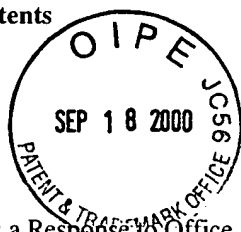
(Date of Signature)

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2731

AMENDMENT TRANSMITTAL FORM

Assistant Commissioner for Patents
Washington, D.C. 20231



Attorney Docket No.: QCPA377CIPA
In Re Application of: Krishnamurthi, et al.
Serial Number: 08/863,457
Filed: May 27, 1997
Examiner: S. Nguyen
Group Art Unit: 2731

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Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

☐ A Request for a () Month Extension of Time is hereby requested.

In addition to the Response, the following documents are enclosed:

1. ☐ Information Disclosure Statement (IDS) and Form PTO-1449 in duplicate:
 - a. ☐ Copies of IDS Citations (number of citations:)
2. ☐ Change of Attorney's Address in Application.
3. ☐ Terminal Disclaimer
4. ☐ Other:

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	14	14	0	x \$18 =	\$0.00
Independent**	3	3	0	x \$78 =	\$0.00
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$260	\$
EXTENSION FEES			<input type="checkbox"/> One Month	\$110	\$
			<input type="checkbox"/> Two Months	\$380	\$
			<input type="checkbox"/> Three Months	\$870	\$
INFORMATION DISCLOSURE STATEMENT			<input type="checkbox"/> After First Office Action	\$240	\$
			<input type="checkbox"/> After Final Office Action	\$130	\$
TERMINAL DISCLAIMER				\$110	\$
				TOTAL FEE	\$0.00

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

5. ☐ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.

The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit

any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.

6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: September 12, 2000

Signature: Maryanne E. DeAngelo
Maryanne E. DeAngelo, Reg. No. P47,288
(858) 651-2384

QUALCOMM Incorporated
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